

ARIZONA DEPARTMENT OF HOUSING MANUFACTURED HOUSING DIVISION

1110 West Washington, Suite 280, Phoenix, AZ 85007, Phone: (602) 364-1032

Home Walk Through Inspection Checklist

Homeowner Name:		Phone: ()		
Address:		City:	State:Zip:	
Retailer Name:	License #	Phon		
		City:	State: Zip:	
	Year:N	fodel:S	erial No:	
Installation Date:	or Designated	Cosmetic Complaint Date	e:	
	!!!ATTENTION HO	MEBUYER!!!		
This walk through inspection	n is being conducted for your benefit. It is	important to thoroughly exam	nine each item listed below.	
If there is a problem, circle t	ns below for operation and appearance a the number and the item on the list then w the problem. Example: A. 13 Countertop	vrite the room letter and the i		
A. Kitchen	B. Living Room/Dining Room	C. Den/Family Room	D. Hallway	
1. Door 2. Switches/Receptacles 3. Light Fixture(s) 4. Walls 5. Trim 6. Windows 7. Drapes/Mini-Blinds 8. Carpet/Floor Covering 9. Ceiling 10. Air Registers 11. Fan(s) 12. TV/Phone Jacks 13. Countertops 14. Cabinets 15. Appliances 16. Sink 17. Disposal	1. Door 2. Switches/Receptacles 3. Light Fixture(s) 4. Walls 5. Trim 6. Windows 7. Drapes/Mini-Blinds 8. Carpet/Floor Covering 9. Ceiling 10. Air Registers 11. Fan(s) 12. Foyer 13. TV/Phone Jacks 14. Fireplace/Doors & Health 15. Hutch/Entertainment Center	1. Door 2. Switches/Receptacles 3. Light Fixture(s) 4. Walls 5. Trim 6. Windows 7. Drapes/Mini-Blinds 8. Carpet/Floor Covering 9. Ceiling 10. Air Registers 11. Fan(s) 12. TV/Phone Jacks 13. Cabinets	 □ 1. Door □ 2. Switches/Receptacles □ 3. Light Fixture(s) □ 4. Walls □ 5. Trim □ 6. Windows □ 7. Drapes/Mini-Blinds 	
E. Master Bedroom	F. Bedroom	G. Bedroom 3	H. Home Exterior	
1. Door 2. Switches/Receptacles 3. Light Fixture(s) 4. Walls 5. Trim 6. Windows 7. Drapes/Mini-Blinds 8. Carpet/Floor Covering 9. Ceiling 10. Air Registers 11. Fan(s) 12. Closet Door(s) 13. TV/Phone Jacks	 □ 1. Door □ 2. Switches/Receptacles □ 3. Light Fixture(s) □ 4. Walls □ 5. Trim □ 6. Windows □ 7. Drapes/Mini-Blinds □ 8. Carpet/Floor Covering □ 9. Ceiling □ 10. Air Registers □ 11. Fan(s) □ 12. Closet Door(s) □ 13. TV/Phone Jacks 	1. Door 2. Switches/Receptacles 3. Light Fixture(s) 4. Walls 5. Trim 6. Windows 7. Drapes/Mini-Blinds 8. Carpet/Floor Covering 9. Ceiling 10. Air Registers 11. Fan(s) 12. Closet Door(s) 13. TV/Phone Jacks	 □ 1. Door □ 2. Switches/Receptacles □ 3. Light Fixture(s) □ 4. Siding/Paint □ 5. Shutters/Trim □ 6. Windows □ 7. Hose Bib □ 8. Water Heater/ Furnace Doors □ 9. Skirting □ 10. Awnings/Post □ 11. Roof □ 12. Stairs □ 13. Fan(s) 	

I. Master Bath	J. Guest Bath	K. Utility Room	L. Other
□ 1. Door □ 2. Switches/Receptacles □ 3. Light Fixture(s) □ 4. Walls □ 5. Trim □ 6. Windows □ 7. Drapes/Mini-Blinds □ 8. Carpet/Floor Covering □ 9. Ceiling □ 10. Air Registers □ 11. Fan(s) □ 12. Countertops □ 13. Cabinets □ 14. Sink(s)/Faucets □ 15. Mirrors □ 16. Tub/Shower □ 17. Commode □ 18. Circuit Interrupet	1. Door	 □ 1. Door □ 2. Switches/Receptacles □ 3. Light Fixture(s) □ 4. Walls □ 5. Trim □ 6. Windows □ 7. Drapes/Mini-Blinds □ 8. Carpet/Floor Covering □ 9. Ceiling □ 10. Air Registers □ 11. Fan(s) □ 12. Countertops □ 13. Cabinets □ 14. Dryer Vented out from Under house. □ 15. Electrical Panels-Labels, etc. 	□ 1. □ 2. □ 3. □ 4. □ 5. □ 6. □ 7. □ 8. □ 9. □ 10. □ 11. □ 12. □ 13. □ 14. □ 15. □ 16. □ 17. □ 18.
Smoke alarm(s) have been to Description area	ested and alarm has sounded		
any problems with the drywall the end of the first year if you to The consumer is urged to first regarding cosmetic items with	within the first year, the retailer of the retailer of the problem. contact the retailer regarding any	o gallons of paint to match each interior manufacturer must make one addity problems with the home. The consultsing, Manufactured Housing Division-4032).	ional visit for repairs before mer must file any complaints
Owner/Agent Signature	Date	Agent Signature	Date
Owner/Agent Signature	Date		

White copy - Retailer

Pink copy - Purchaser